Indiana Judges and Lawyers Assistance Program

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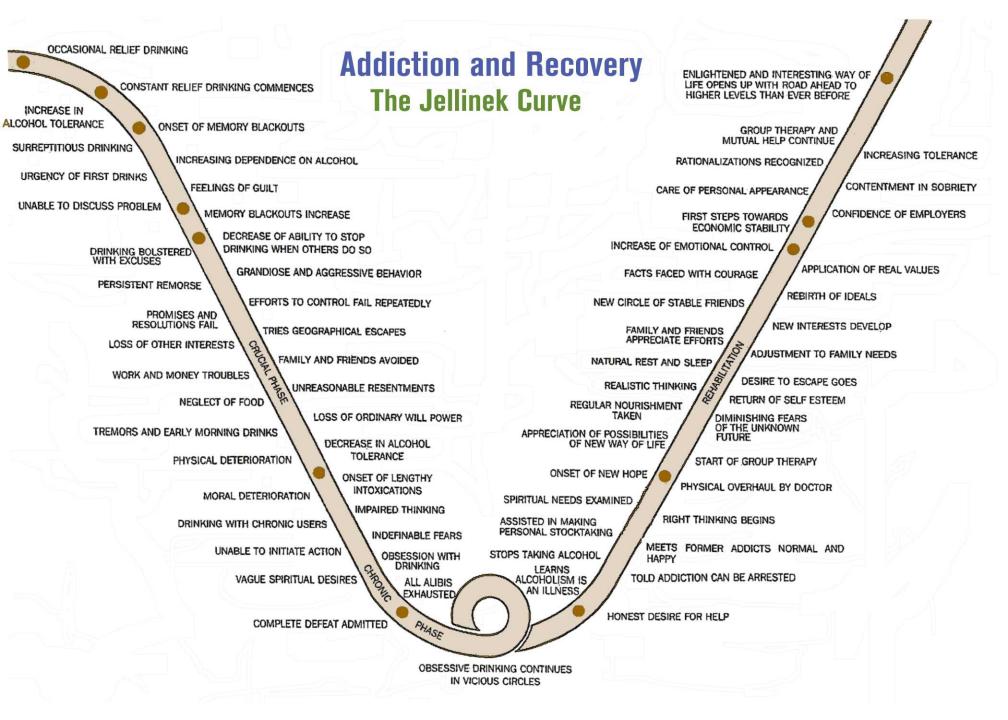
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What is Chemical Dependency?

Primary disease characterized by the compulsive use of mood altering drugs (including alcohol) despite adverse consequences (I continue to do something, expected different result).

Characteristics

- ✓ <u>Primary Disease</u>: The disease itself causes drinking or drug use. It is not secondary to some other disease or mental illness.
- ✓ <u>Chronic</u>: There is no cure for the disease, but it can be treated and controlled. It demands a change in behavior.
- ✓ <u>Progressive</u>: The disease always gets worse, it does not get better, and there is no turning back and beginning all over again as if one never drank or used.
- ✓ <u>Fatal</u>: This is a fatal disease if not controlled. It always leads to premature death and serious health problems even if death certificate indicates the cause of death to be on eof the complications of the disease, e.g., heart problems, liver failure, bleeding ulcers, etc.
- ✓ <u>Treatable</u>: The disease can be controlled if the drinking or drug use stops. It is much like diabetes in the sense that if the body chemistry is stabilized by not drinking or using, the the alcoholic may lead a normal life.
- ✓ Relapse is Common
- ✓ <u>Genetics Play a Part</u>: Since 1980 many studies corroborate genetic or familial predisposition to the disease.
- ✓ <u>DENIAL</u> is a hallmark of the disease.



Signs & Symptoms in Attorneys

Early Stage

- ✓ <u>Professional</u>: client neglect, unreturned phone calls, late for depositions, cancelled appointments, numerous "sick" days
- ✓ <u>Legal</u>: 1st DUI, open container, disorderly conduct
- ✓ Ethical: late for hearings, "technical" trust violations (reconciliations, ledger cards), "last minute" filings, failure to diligently prosecute/defend

Late Stage

- ✓ <u>Professional</u>: failure to come to the office and/or appear for hearings, intoxicated in court, unprofessional appearance/hygiene, inappropriate mood (depressed, angry, withdrawn), abandonment of practice
- ✓ <u>Legal</u>: 2nd DUI, controlled substance charge, domestic violence
- ✓ <u>Ethical</u>: Substantive trust violations (misappropriation), statute of limitations violations, dishonesty to tribunal

Are You an Alcoholic?

20 Questions developed by Johns Hopkins Hospital

Answer as truthfully as you can:

- 1. Do you lose time from work due to drinking
- 2. Is drinking making your home life unhappy?
- 3. Do you drink because you are shy with other people?
- 4. Is drinking affecting your reputation?
- 5. Have you ever felt remorse after drinking?
- 6. Have you gotten into financial difficulties as a result of drinking?
- 7. Do you turn to lower companions and an inferior environment when drinking?
- 8. Does your drinking make you careless of your family's welfare?
- 9. Has your ambition decreased since drinking?
- 10. Do you crave a drink at a definite time daily?
- 11. Do you want a drink the next morning?
- 12. Does your drinking cause you difficulty in sleeping?
- 13. Has your efficiency decreased since drinking?
- 14. Is drinking jeopardizing your job or business?
- 15. Do you drink to escape from worries or troubles?
- 16. Do you drink alone?
- 17. Have you ever had a complete loss of memory due to drinking?
- 18. Has your physician ever treated you for drinking?
- 19. Do you drink to build up your self-confidence?
- 20. Have you ever been to a hospital or institution on account of your drink

Are You an Alcoholic?

20 Further Questions Developed by California Lawyers for Their Colleagues

- 1. Have you ever failed to show up at the office because of a hangover?
- 2. Failed to appear in court for the same reason?
- 3. Neglected to process mail promptly?
- 4. Neglected to pay State Bar dues on time?
- 5. Frequently failed to keep appointments?
- 6. Showed up in court or at depositions under the influence?
- 7. Are you drinking in the office during office hours?
- 8. Have you used misused –co-mingled or borrowed clients' Trust Funds?
- 9. Have you failed to accept or answer telephone calls because you didn't feel good?
- 10. Have you gotten other attorneys to make court appearances on your behalf?
- 11. Are you avoiding the resolution of problems?
- 12. Are you regularly partaking of noontime cocktails?
- 13. Is your ability to perform diminished in the afternoon?
- 14. Are you frequently blaming your secretary for the things that go wrong?
- 15. Are your relationships with your clients, staff and friends deteriorating?
- 16. Do you get drunk at bar association meetings and social gatherings?
- 17. Does your spouse complain that you are drinking too much?
- 18. Are you missing deadlines for performance like allowing the Statute of Limitations to run out?
- 19. Are you losing control at social gatherings when professional decorum is called for?
- 20. Are these occurrences increasing in frequency?

Enabling Behaviors and Bottom Lines

Enabling Behaviors

Out of love, fear, we do all sorts of things to protect our alcoholics. Most of the things we do, however, actually help the addiction instead. As a result, the addiction flourishes, and our loved ones get sicker. This is called enabling. Discover ways you've enabled the addiction and check all the behaviors you can recognize in yourself:

Give or lend money
Provide a place to live
Clean up after messes
Supply a car
Bail out of jail
Lie to cover up problems
Deny the addiction to others
Ignore or laugh at the problem
Argue, plead, beg, threaten, placate, or bargain
Put yourself in jeopardy
Leave minor children alone with the alcoholic
Take over responsibilities
Protect from negative consequences
Avoid social functions
Offer a job
Pay for school
Pay for alcohol or other drug use
Others

Enabling Behaviors and Bottom Lines

Bottom Lines

If you think you don't have a bottom line, go back and review ways you've enabled the addition. Each of our enabling behaviors can be turned into a bottom line. The following will help you brainstorm.

"I will no longer give you money"

"I will not pay your mortgage from now on."

"If you do not accept help for your drug problem, you can no longer live in my home."

"I'm taking the car keys away until you get help for your alcohol problem."

"I'm not a liar, so I will no longer lie to people about your addiction problem."

"I've pretended not to notice your problem in the past. From now on, if you come over when you are high, I'm not going to let you in the house."

"The next time I see you get in a car to drive intoxicated, I will call the police."

"I won't listen to your problems until you get help for your number-one problem – alcohol and other drugs."

I will no longer ride with you or socialize with you when you are drunk."

"I will no longer pick up your slack at work. When you don't get your work done, you'll have to explain to the boss."

I'm not going to tell your boss you have the flu when you have a hangover."

"I will not invite you to family get-togethers until you get help for your drug problem."

"You can no longer work for me unless you complete treatment and stay sober."

Your mom and I will quit paying your school expenses until you get help."

"If you don't get help on your own, we will have you court-ordered into treatment."

The bottom line is not a punishment. It's a decision we make *not* to support the addiction and to take care of ourselves. For the alcoholic, the bottom line is a natural consequence of deciding to stay in the disease of addiction. Below, write three of your bottom lines:

Intervention Tips

What To Do:

- ✓ Educate
- ✓ Observe
- ✓ Listen ✓ Respect
- ✓ Support
- ✓ Listen ✓ Offer Options
- ✓ Listen
- ✓ Motivate
- ✓ Treat everyone involved as adults responsible for their own behaviors and decisions

What Not To Do:

- ✓ Diagnose
- ✓ Accuse
- ✓ Direct
- ✓ Solve
- ✓ Order
- ✓ Blame
- ✓ Assume
- ✓ Enable

Ouizzes

Families sometimes feel unsure about how to assess a loved one's problem. On the following pages you'll find three self-quizzes. They are designed to help you think about the possible chemical dependency of a loved one and how it has affected you. These quizzes are not scientific diagnostic tools. Some questions may carry more weight than others. They don't prove whether someone does or doesn't have a problem. You must rely on your discretion and common sense when evaluating the results.

These quizzes are *not* meant to be "evidence" to present to the chemically dependent person. *Do not bring any of these quizzes to the alcoholic or addict as proof or confirmation of addiction.* This would be an inappropriate way to address the problem and may cause angry and resentful reactions from the addict.

QUIZ: Are you troubled by someone's drinking?

The following questionnaire was designed by Al-Anon to help you decide whether Al-Anon is right for you. As you take this quiz, keep in mind that you may have been affected by a parent's drinking when you were a child. Although Al-Anon does not provide guidelines on how to evaluate your answers to this quiz, we suggest you attend Al-Anon if you answer "yes" to two or more questions.



QUIZ: Is a family member chemically dependent?

To determine whether or not an alcohol or drug problem is affecting your family, ask yourself the following questions:

 Does someone in your family undergo personality changes when he or she uses alcohol or other drugs? Are you sometimes anxious before holidays or social occasions because you are worried that he or she may disrupt it by getting high or drunk? Have you ever found it necessary to lie to employers, relatives, or friends to hide his or her alcohol or drug use? Have you ever hidden car keys, thrown out the alcohol or drugs, or used other methods to attempt to control his or her use? Have you ever felt embarrassed or felt the need to apologize for his or her actions? Have you ever asked him or her to stop or cut down on his or her use of alcohol or other drugs? Has he or she ever promised to stop or cut down on his or her use of alcohol or other drugs? Has he or she ever promised to stop using alcohol or other drugs without success? Has he or she ever failed to remember what occurred during a period of alcohol and/or drug use? Does he or she avoid social situations where alcohol and/or drugs will not be available? Does he or she have periods of remorse after periods of use and does he or she apologize for his or her behavior? Does he or she justify his or her use by blaming a stressful lifestyle or difficult emotional situations? Do other family members fear or avoid this person after he or she has been using alcohol or other drugs? Has another person expressed concern about his or her drinking or drug use? Has he or she ever made promises that he or she did not keep because of drinking or drug use? Has his or her reaction to a given amount of alcohol or other drugs changes? Does he or she deny a drinking problem because he or she drinks only wine or beer? Do you find yourself avoiding social situations that include alcohol or other drugs?

If you answered "yes" to any of the above questions, there is a possibility that someone in your family is developing a problem with alcohol or other drugs. If you answered "yes" to two or more, chemical use is probably causing serious problems in your family.

QUIZ: Signs of Alcoholism and Drug Abuse in Older People

The signs of alcoholism and drug addiction can be different in adults fifty-five years old and over than in younger people. They often drink alone at home so no one notices the severity of the problem. Many older adults are retired, so they don't have work-related problems due to their chemical dependency. They drive less, so there's less opportunity for them to get arrested for driving under the influence.

The following signs of an alcohol or other drug problem are typical in the older adult

Prefers attending a lot of events where drinking is accepted, such as luncheons, "happy hours," and parties
Drinks in solitary, hidden way
Makes a ritual of having drinks before, with, or after dinner, and becomes annoyed when this ritual is disturbed
Loses interest in activities and hobbies that used to bring pleasure
Drinks in spite of warning labels on prescription drugs
Always has bottles of tranquilizers on hand and takes them at the slightest sign of disturbance
Is often intoxicated or slightly tipsy, and sometimes has slurred speech
Disposes of large volumes of empty beer and liquor bottles and seems secretive about it
Often has the small of liquor on his or her breath or mouthwash to disguise it
Is neglecting personal appearance and gaining or losing weight
Complains of constant sleeplessness, loss of appetite, or chronic health complaints that seem to have no physical cause
Has unexplained burns or bruises and tries to hide them
Seems more depressed or hostile than usual
Can't handle routine chores and paperwork without making mistakes
Has irrational or undefined fears or delusions, or seems under unusual stress
Seems to be losing his or her memory

Many of the symptoms listed above are attributed to other diseases or are considered part of the aging process. However, many older people find that once they achieve sobriety, these symptoms disappear.